



**MSD**

*Louisville and Jefferson County Metropolitan Sewer District  
700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
www.msdlouky.org*

December 22, 2008

Ms. Carolena Bentley  
Kentucky Division of Water  
200 Fair Oaks Lane  
Frankfort, Kentucky 40601

**Re: MSD Metro Operations  
Silver Heights WTP; KPDES No.: KY0028801  
Discharge Monitoring Reports – November 2008.**

Dear Ms. Bentley:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Silver Heights WTP, KPDES No.: KY0028801 for the month of November 2008.

If you have any questions concerning the attached DMRs, please contact me at (502) 540-6031.

Sincerely,

John Kessel  
Process Supervisor West Operations

JMK/Silver Heights 1108.doc

Enclosures

cc: T. Singleton  
R. Shaw  
C. Roth



*Beneficial Use of Louisville's Biosolids  
www.louisvillegreen.com*

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME SILVER HEIGHTS STP MSD  
ADDRESS C/O CEDAR CREEK STP  
S405 CEDAR CREEK RD  
LOUISVILLE KY 40211  
FACILITY SILVER HEIGHTS STP MSD  
LOCATION LOUISVILLE KY 40229  
ATTN: DENNIS THOMASSON, SR METRO OPS

PERMIT NUMBER: KY0028801  
DISCHARGE NUMBER: 0012  
MONITORING PERIOD: FROM 09/01 TO 09/14 2009

MINOR (SUBR LV)  
FINAL  
SANITARY WASTEWATER  
EFFLUENT  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read Instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
OXYGEN, DISSOLVED (DO)	***	***	***	7	***	***	0	0/07	GR
EFFLUENT GROSS VALUE	***	***	***	INST MIN	***	***	0	WEEKLY GRAB	GR
PH	***	***	***	6.8	***	6.9	0	0/09	GR
EFFLUENT GROSS VALUE	***	***	***	MINIMUM	***	9.0	0	WEEKLY GRAB	GR
SOLIDS, TOTAL	10	11	(25)	***	***	MAXIMUM	0	0/07	CP
SUSPENDED	125	250	DAILY MX	5	30	DAILY MX	0	WEEKLY COMPOS	CP
EFFLUENT GROSS VALUE	0.20	0.40	(25)	***	***	0.20	0	0/07	CP
NITROGEN, AMMONIA TOTAL (AS N)	41.7	83.4	DAILY MX	***	***	DAILY MX	0	WEEKLY COMPOS	CP
EFFLUENT GROSS VALUE	***	***	***	***	***	1.7	0	0/07	CP
PHOSPHORUS, TOTAL (AS P)	***	***	***	***	***	REPORT	0	WEEKLY COMPOS	CP
EFFLUENT GROSS VALUE	0.223	0.352	(03)	***	***	DAILY MX	0	0/30	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	REPORT	REPORT	INST MAX	***	***	***	0	CONTINUOUS	CN
EFFLUENT GROSS VALUE	***	***	***	***	***	20.010	0	WEEKLY GRAB	GR
CHLORINE, TOTAL RESIDUAL	***	***	***	***	***	0.015	0	WEEKLY GRAB	GR
EFFLUENT GROSS VALUE	***	***	***	***	***	DAILY MX	0	WEEKLY GRAB	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: *Eric Hill*  
 TYPED OR PRINTED: *H.J. Subaidon Jr*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *[Signature]*  
 TELEPHONE: *540 4400*  
 DATE: *08 12 2009*

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 USE MD AVG FOR BOD/TSS REMOVAL IN MINIMUM COLUMN.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

MINOR (SUBR LV)  
F - FINAL  
SANITARY WASTEWATER  
EFFLUENT  
\*\*\* NO DISCHARGE \*\*\*

PERMIT NUMBER: KY0026801  
DISCHARGE NUMBER: 0012

MONITORING PERIOD  
FROM: YEAR 08 MO 11 DAY 01 TO YEAR 08 MO 11 DAY 30

PERMIT NUMBER: KY 40211  
DISCHARGE NUMBER: KY 40229

FROM: YEAR 08 MO 11 DAY 01 TO YEAR 08 MO 11 DAY 30

ATTN: DENNIS THOMASSEN, SR METRO OPS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME: SILVER HEIGHTS STP MSD  
ADDRESS: C/O CEDAR CREEK STP  
2405 CEDAR CREEK RD  
LOUISVILLE  
FACILITY: SILVER HEIGHTS STP MSD  
LOCATION: LOUISVILLE  
ATTN: DENNIS THOMASSEN, SR METRO OPS

JEFFRE

NOTE: Read Instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
COLIFORM, FECAL GENERAL	*****	*****	*****	*****	1	1	0	01/07	CR
74055 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	200	400	0	WEEKLY	CR
BOD, CARBONACEOUS 05 DAY, ZOC	5	6	(26)	*****	30DA GED	DAILY MX	0	01/07	CR
EFFLUENT GROSS VALUE	62.6	125	LB5/DY	*****	15	30	0	WEEKLY	COMPO
	30DA AVG	DAILY MX	MS/L	*****	30DA AVG	DAILY MX			
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		DATE	
TYPED OR PRINTED			AREA CODE			NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) USE MG AVG FOR BOD/TSS REMV. REPT. IN MINIMUM COLUMN.									

Silver Heights		Report for	Nov-08		Tot. Exc.=		0	
Tot. Flow=	6.695	Concentrations				Pounds		
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3
11/1/08	0.212							
11/2/08	0.21							
11/3/08	0.228							
11/4/08	0.201	6	3	0.11	1	10.058	5.029	0.184
11/5/08	0.21							
11/6/08	0.212							
11/7/08	0.203							
11/8/08	0.184							
11/9/08	0.202							
11/10/08	0.21							
11/11/08	0.196	6	3	0.055	1	9.808	4.904	0.090
11/12/08	0.202							
11/13/08	0.196							
11/14/08	0.215							
11/15/08	0.202							
11/16/08	0.326							
11/17/08	0.284							
11/18/08	0.224	4	3	0.055	1	7.473	5.604	0.103
11/19/08	0.211							
11/20/08	0.205							
11/21/08	0.205							
11/22/08	0.188							
11/23/08	0.199							
11/24/08	0.215	6	3	0.22	1	10.759	5.379	0.394
11/25/08	0.284							
11/26/08	0.245							
11/27/08	0.23							
11/28/08	0.225							
11/29/08	0.352							
11/30/08	0.219							
12/1/08								
Average	0.223	5.50	3.00	0.11	1.00	9.52	5.23	0.19
Maximum	0.352	6.00	3.00	0.22	1.00	10.76	5.60	0.39
Exceed.	0	0	0	0	0	0	0	0
Day Viol.								
Mo. Viol								
Minimum	0.184 MIN	MAX						
DO (min)								
pH								
TRC								

This plant has a summer ammonia limit of 4/8 mg/L and 16.7/33.4 pounds  
This plant has a winter ammonia limit of 10/20 mg/L and 41.7/83.4pounds  
Winter limits are from November - April, Summer is from May - October